

A Public Document

1. Agency Name COUNTY OF ALAMEDA		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region <i>(if applicable)</i> BOARD OF SUPERVISORS			
Street Address 1221 OAK STREET, SUITE 536			
Designated Agency Contact <i>(Name, Title)</i> Crystal Hishida Graff, Clerk, Board of Supervisors		<input type="checkbox"/> Amendment <i>(Must provide explanation in Part 3.)</i>	
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	Date of Original Filing: _____ <i>(month, day, year)</i>	

2. Function, Event, or Ceremonial Role Information

Title DISNEY ON ICE Face Value of Each Admission \$ 32.10

Description GSW Date(s) 03/03/12 / /

Ticket(s)/Admission(s) provided by agency? Yes ☒ No ☐ If no: _____
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: SUPERVISOR SCOTT HAGGERTY, DISTRICT 1
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization. 	
DEDE DAVIS	4	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	TO REWARD A COMMUNITY VOLUNTEER FOR HIS OR HER SERVICE TO THE PUBLIC	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>

3. Verification

I have read and understand EPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,

Lee Ann Ferguson	Ticket Administrator	03-05-12
Print Name	Title	(month, day, year)

nt for any additional information including amendment explanation.)